

Federalism, Intergovernmental Relationships, and Emergency Response: A Comparison of Australia and the United States

American Review of Public Administration 2020, Vol. 50(6-7) 526–535 © The Author(s) 2020 Article reuse guidelines: sagepub.com/journals-permissions DOI: 10.1177/0275074020941696 journals.sagepub.com/home/arp

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Abstract

The recent COVID-19 pandemic has significantly disrupted governance. A strong intergovernmental response is critical for stemming the worst damage during the outset of a disaster. Collaborative planning with networks of constituent governments, medical experts, and emergency managers are needed to provide a holistic response to the highly technical and complex issues brought on by the novel coronavirus. This commentary highlights the differences in response by the United States and Australia, provides a comparison of intergovernmental relationships, and sheds light on how these federations vertical and horizontal collaborative efforts were stymied by politics or facilitated by existing intergovernmental forums.

Keywords

executive federalism, intergovernmental relations, disaster response, Australia

Introduction

With the recent COVID-19 (novel coronavirus disease 2019) pandemic, disruptions to governance have significantly increased. During crises, governments are tasked with responding to highly technical, complex issues and strong intergovernmental response is critical for stemming the worst damage during the outset of a disaster. As seen in governmental response to past disasters (Hurricane Katrina in the United States in 2005, the Japanese Fukushima Nuclear Disaster in 2011, and the Australian Wildfires of 2019–2020), gaps in local, state, and national policies are exposed leading to policy change. In some cases, these responses produce real change, whereas, in others, fissures in equity, access to decision makers, and economic rebound are complicated by a lack of strong guidance. The novel coronavirus poses a worldwide health crisis that demands a holistic response marked by collaborative planning within and between networks of constituent governments, medical experts, and emergency managers. As scholars and policymakers grapple with understanding how different governments are responding to these new circumstances, an exploration of federal states and their response to the evolving crisis may shed some light on the utility of this form of governance for future disasters.

This commentary highlights the differences in response in these two countries, provides a comparison of the differences in the intergovernmental relationships between the Prime Minister of Australia and state premiers, and the President of the United States' contentious relations with state governors during the pandemic to shed light on how well federations are equipped to respond to a crisis of this magnitude. This piece concludes with a set of suggested best practices which aim to inform scholars of federalism, practitioners of emergency management tasked with response, and state and local leaders in federations across the world.

Federalism and Intergovernmental Relations

In crises, all governmental systems, but particularly federal systems, face challenges related to horizontal and vertical collaboration and coordination (Gray, 1985; Ryan, 2012; Zimmerman, 2011). For simplicity, we can think of federalism as a system of government that balances citizen preferences for both joint actions at the national level for certain purposes and the allowance of self-government of constituent units for other purposes (Caldwell, 1990; Elazar, 1997;

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Hamilton et al., 2009). Generally, within federalism systems, there are enumerated powers given to each branch of government as well as specific policy domains that are under their purview. Under this system of governance, states and the national government are co-sovereign.

On one hand, federalism as a form of governance is notable due to its ability to protect and foster the divergent policy preferences of territorially based groups, thus minimizing coercion by the central government while maximizing policy responsiveness at the subnational level. Federalism in its purest form protects state autonomy, venerates distinct state interests, and ensures separation between state and national interests (Bulman-Pozen, 2013a). Simultaneously, federal systems can be highly dysfunctional when clear guidance is needed during an emergency due to this co-sovereign arrangement (Honadle et al., 1982; Maxeiner, 2014).

Federalism has passed through several phases since its adoption as the system of government in the United States. In the earliest days of the republic, the practice of dual federalism, whereby the different levels of government (federal, states, and substate units) primarily acted in their policy spheres, was the common practice. With the Spanish Flu pandemic of 1918, the stock market crash of the 1920s, and the start of the Great Depression which lasted from 1929 to 1933, states and their citizens faced substantial financial hardships. Responding to these substantial financial challenges, the U.S. federal government created massive social and work programs, to maintain a semblance of economic order during those trying times. Laws passed by Congress during this era utilized statutes and regulatory law to direct the actions of federal executive agencies as well as the corresponding state administrative counterparts. This new type of federalism, sometimes called cooperative or marble cake federalism, ushered in the collaborative and cooperative management of state and national policies (Honadle et al., 1982; Kincaid, 1990).

In the late 1960s, President Nixon began dismantling the burgeoning welfare state programs and ushered in an era of devolution or the transfer of power from the federal to state and local governments (Kincaid, 1986). In practice, this meant that states continued to receive funds to implement and manage programs; however, many of the policies, once the purview of the national government like Medicaid, TANF (Temporary Assistance for Needy Families), and community and economic development, became the responsibility of subnational governments (Katz, 2014; Trenkner, 1987). When passing legislation related to Medicare, Medicaid, environmental protection, and other programs, Congress increased the ability for states receiving funds to seek waivers allowing for increased experimentation at the state level (Bulman-Pozen, 2013a; Thompson et al., 2018). President Reagan further integrated the tenants of new federalism into budgetary policy by attaching more strings to categorical grants, eliminating some block grant programs altogether, introducing general revenue-sharing, defunding social

programs, and cutting state aid (Frederickson, 1996; Nathan & Doolittle, 1987; Verstegen, 1990). As an adaptive measure, many states and localities increased their dependence on the third sector for management and to provide personnel to continue many of these types of programs. States and local governments were forced to privatize many programs creating what some have dubbed the "hollow state" (Carboni & Milward, 2012; Milward & Provan, 2000). The politically expedient explanation for this shift in intergovernmental relations is to allow for more innovation, discretion, better alignment of policy to local desires and needs, increased competition and experimentation, as well as more accountability to local citizens. Although this shift has been a bane to the fiscal health of state governments, it has allowed the federal government to shrink in size both in terms of employees and in the outlay of federal funds to states (Krane et al., 2004; Quigley & Rubinfeld, 1996; Watts, 1996).

The newest era of federalism that has emerged in recent years is executive federalism. Public administration and legal scholars have observed federal—state relations in managing major grant programs as increasingly intransigent, mired in conflict, and partisanship in recent years. Scholars have identified a marked shift in the congressional relationship in intergovernmental relations with congressional leaders ceding much of their powers of creating policy to the executive branch.

Executive federalism is marked by the delegation of discretion to the executive branch for the implementation of federal programs. In this version of federalism, the executive branch including political appointees and the president himself, not the legislative branch of the national government, plays the lead role in corralling support for policies instead of civil servants and congressional leaders. Under this framework, governors have additional leverage negotiating directly with executive branch political appointees and, sometimes, making direct appeals to the president to carve out waivers for policies that their respective states want (Bulman-Pozen, 2013b; Bulman-Pozen & Gerken, 2009; Thompson, 2013; Thompson et al., 2018).

In this new era of federalism, state-federal intergovernmental relationships are dominated by partisanship and the behavior of executives at both state and national levels typically operates in a context of divided party control. This means that, in times when the party identification of a governor matches that of the president in the White House, policy challenges from out-party governors increase, only to switch sides when a new president is elected from the other party. This era of executive federalism has heightened the state-bystate variation in policy adoption, as exemplified in the fight over the passage of SB 1070 in Arizona and the Obama administration. SB 1070 would have made it a crime to be in Arizona without carrying state-issued identification. This identification was required by the police during stops to determine immigration status. In defending state law, Arizona did not challenge the national government's authority over immigration; instead, the lawsuit claimed that the federal executive branch was not carrying out immigration law to its fullest extent. The suit went further to say that Congress has lent states authority to cooperate in immigration enforcement, and thus SB 1070 was an extension of this enforcement power (Bulman-Pozen, 2018; Butz & Kehrberg, 2019; Newton, 2018; Wills & Commins, 2018).

It is notable that in this example, when states want to carry out a federal law differently than the federal executive, the objection made by states is not a federalism argument instead, the framing of the legal argument is that made instead lies in states suggesting that the federal executive branch's execution of policy is inconsistent with the statutory meaning of law. As Bulman-Pozen (2013a) states, "rather than challenge the raw exercise of federal power, states challenge the faithfulness of the [federal] executive to the statutory scheme." Thus, states when issuing these challenges cast themselves as steadfast agents of Congress in contrast to an obstinate executive branch. Similar work in this vein highlights similar legal arguments in the execution of Clean Air Act regulations and the Environmental Protection Agency's (EPA) enforcement of vehicle emission standards in California, as well as more recent fights over the Affordable Care Act (ACA) under Obama and Trump (Raether, 2020; Wiseman, 2018). What is most notable about these legal arguments is the underlying partisan nature of conflict by the executives in states and the federal executive branch.

Executive Federalism: A View From Abroad

Abroad, federalism has not had such a problematic evolution. The term "executive federalism" arises from the integration of federal and parliamentary institutions and the resulting processes of intergovernmental negotiation that are typically dominated by the executives of the different governments (Smiley, 1980, p. 91; Walker, 2000, pp. 24–25; Watts, 1989, p. 3). Executive federalism is typically distinguished by the differences in intergovernmental financial arrangements where federal-parliamentary countries like Australia explicitly implement revenue-sharing and equalization arrangements from the national to and across state and territory governments as opposed to federal-presidential countries like the United States where revenue-sharing is conditional and program specific and there is no system of equalization between states (Watts, 1989). Executive federalism in Australia is expressed through a variety of formal and informal councils and conferences held annually or more frequently, numerous formal and informal agreements, policies and programs, and extensive contacts between officers and ministers in different governments (Phillimore & Fenna, 2017; Watts, 1989).

Executive federalism in the United States has more explicitly focused on the federal grant system, the scope of administrative discretion afforded by Congress in program implementation to political appointees in the executive

branch, and state-level executives, usually governors, gaining waivers or exemptions from program regulations (Thompson, 2013; Thompson et al., 2018). The relationship between governments in both Australia and the United States is both vertically oriented and dominated by the national government. Executive federalism in the United States is much more transactional and politically driven where states are focused on securing influence and protecting their autonomy (Behnke & Mueller, 2017; Bowman, 2017). Australian states and territories are likewise motivated by policy influence and autonomy, but the emphasis on coordination and information sharing that derives from the repeated interactions between executive and ministerial authorities in a variety of intergovernmental forums acts to broaden and deepen the federal relationship between governments (Behnke & Mueller, 2017; Phillimore & Fenna, 2017).

The Importance of Disaster Response

Public policies that are designed to meet the challenges of natural or man-made disasters are typically aggregated under the rubric of emergency management, but can be divided into four categories: preparedness, mitigation, response, and recovery. Preparedness policies are related to activities which are anticipatory and increase a community's capability to respond effectively to an emergency. Mitigation policies are those policies which are intended to reduce the impact of hazards. Response policies are those which help communities to strengthen emergency operations during a disaster and assist victims. Finally, recovery policies refer to activities which are meant to rehabilitate or restore communities after an emergency has passed (Baird, 2010; Henstra, 2010; Schneider, 1995). In most countries, however, emergency response is a primarily local responsibility. Local officials such as fire, police, and emergency medical service personnel are the first responders when a crisis hits. Therefore, although there may be a national-level emergency policy apparatus in place, it is critically important that local governments are empowered as well. Local, state, and national governments are often pressured to demonstrate that resources allocated to emergency planning are being used effectivity—which is a specific problem for emergency management as natural hazards like hurricanes, earthquakes, floods, and pandemics are few and far between.

Scholars have also noted issues of partisanship, lack of centralized organization, and mismatched policy response to natural disasters in the United States in recent years. These issues were most notable during Hurricane Katrina when issues of race and poverty politicized the underwhelming emergency response (Downey, 2014; Downey & Reese, 2017; "Flashback: Kanye West Attacks George W. Bush Over Katrina Response," n.d.; Waugh, 2006; William, 2006; Woods et al., 2006). In recent years, however, improvements have been made to policy to facilitate a swifter response for future disasters (Johnson & Olshansky, 2016; Waugh & Streib, 2006).

In federal systems, the temptation to lay blame on other levels of government when resources are strapped is strong (Negishi, 2017; Sweeney, 2006; Tynes et al., 2006). As local governments are traditionally the most underresourced and least powerful in federal systems, it is difficult for localities to manage large-scale crises without some outside assistance from states or the national government. When this assistance is slow in coming, political grandstanding inevitably follows. Countries that are most effective in dealing with disasters have in place integrated emergency response systems which are activated when local response is overwhelmed.

Local and state governments rarely take the initiative to fully develop the horizontal networks needed during disasters in advance, and oftentimes collaboration between nonprofits, local governments, and other organizations is an after-disaster or during-disaster activity when these networks should be in place as part of the preparedness stage of emergency management planning (Heinze et al., 2016; Mintrom & Vergari, 1996; Salisbury et al., 1987). These planning issues are often further complicated by bureaucratic inertia and red tape (Congleton, 2006; Miles, 1965; Rourke, 1992). We argue that these institutional differences have become particularly salient during each country's response to the COVID-19 pandemic and these differences have structured and impacted the (in)coherence of response.

The United States' Response to COVID-19

The United States has had an admittedly haphazard response to the COVID-19 pandemic at the national level by all metrics. Inconsistent federal guidance regarding stay-at-home orders, as well as conflicting messages of the use of face masks for personal protection, and significant problems with coordinating the distribution of personal protection equipment for medical responders has taken up lots of space in national and local newspapers across the country (Beauchamp, 2020; Hauck et al., 2020 "Trump Foments Protests Against Governors; Experts Warn of Testing Shortages," 2020).

As the novel coronavirus spread quickly beyond China's borders in late December 2019, the White House and the president scrambled to control both the information shared with public and the federal response to the disaster. On January 21, 2020 this first U.S. case was confirmed in Washington state. On the 22nd of January, President Trump during an interview with CNBC responding to the news said, "We have it totally under control, everything's going to be just fine" (Kernen, 2020). Seven days later, President Trump convened a coronavirus taskforce headed by Health and Human Services Secretary Alex Azar. On January 31st, Azar declared coronavirus a public health emergency and restrictions on travel from China to the United States began. In early February, mixed messages from President Trump ranging in several television appearances stated that coronavirus would go away "by April" and that cases were largely

contained. During the month of February, President Trump made more than 800 tweets, yet only 20 of these referred to coronavirus directly. Most notably, these tweets praised the administration's response to the virus while criticizing Democrats or the media in questioning his response to the growing pandemic (Relman, 2020).

In late February, the Trump administration sought an injection of US\$2.5 billion from Congress to fight the spread of the virus, but this move was slammed by Democrats as insufficient and cautioned that moving funds from other health initiatives might weaken overall response to other health-related disasters in the future (Cook & Emma, 2020). On February 26th, President Trump tapped Vice President Pence with leading the federal response to the virus. During a White House briefing on the same day, President Trump stated that the 15 confirmed cases would soon be "close to zero" and that the spread of the virus throughout the United States would not occur (Hellman & Weixel, 2020). The spread of the virus continued and, as state stay-in-place orders increased, thousands of businesses across the United States were temporarily shut down to stem the spread of the virus. Congressional leadership responded with the passage of three major bills providing additional funds for business loans, health system assistance, enhanced unemployment insurance, as well as opening up additional funding for states and municipalities (COVID-19 in Congress Tracked by GovTrack.Us, 2020)

In March, cases in the United States soared from 74 to 187,8321 while President Trump tweeted to his followers and made public statement equating coronavirus to the flu. On March 11, the Centers for Disease Control and Prevention (CDC) declared the coronavirus a global pandemic and the White House expanded its travel ban to Italy as well as Iran, countries which had quickly become viral hotspots. Finally, on March 13th, the White House declared a national emergency freeing up US\$50 billion in disaster funds to be used to help state officials combat the spread of the virus in their states. This was a necessary, but long-delayed step in accelerating the state's ability to respond under the emergency management framework in the United States. It is notable that the White House's announcement of a national emergency was not accompanied by a national stay-at-home order. Instead, the President's Coronavirus Guidelines for America published on March 16th direct citizens to follow the directions of state and local authorities. Direction provided to governors in states with evidence of community spread was limited to recommendations to close schools, bars, restaurants, and other indoor and outdoor venues (The White House, 2020b). Confirmed cases as well as deaths continued to rapidly increase through the month of April and, despite the White House's claims that tests would become widely available and that vaccine production was forthcoming, widely available testing remains an issue throughout the United States and vaccine production has yet to begin.

Although the federal government was mired in partisan spats over how to respond to the global pandemic, states

Stay-at-home order					
Party ID	Lifted (%)	No action (%)	Rolled back (%)	Statewide (%)	Total (%)
Democratic	10	0	2	36	48
Republican	28	12	4	8	52
Total	38	12	6	44	100
Pearson $\chi^2(3) = 1$	9.4567; P = .000				

Table 1. Status of Stay-at-Home Order by Governor's Party as of May 15.

Source. State Data and Policy Actions to Address Coronavirus—The Henry J. Kaiser Family Foundation (https://www.kff.org/coronavirus-covid-19/issue-brief/state-data-and-policy-actions-to-address-coronavirus/).

were working diligently to respond. The Kaiser Family Foundation has tracked several state policy changes including declarations of emergency, school and business closures, stay-at-home orders, and more recently moves to ease social distancing measures (The Henry J. Kaiser Family Foundation, 2020). As emergency management statues in the United States require, states began to declare states of emergency in the early weeks of March prior to the president's declaration on March 13th. These early states included Washington, Michigan, New York, and California—all states which had marked community spread in the early days of the pandemic (Federal Emergency Management Agency, 2020; National Governors Association [NGA], 2020a).

The intergovernmental coordination between the states and the White House also hit numerous roadblocks in the early months of the pandemic. The NGA, the National League of Cities, the Council of State Governments, and the United States Conference of Mayors among other vested interest groups have continued to lobby the White House and Congress for financial assistance and testing and other critical medical supplies (NGA, 2020b). Larry Hogan, the Republican Maryland governor and the chair of the NGA, released a plan in late April laying out a roadmap for reopening the economy; however, the plan strongly pushed back on premature full-scale reopening of the economy without more testing supplies being made available, developing contact tracing programs in all states, ensuring state health care systems have the necessary equipment to respond to surges in outbreaks, and a plan to protect at-risk populations and essential workers (NGA, 2020c). Soon after the report was released and Hogan's statements regarding the lack of test kits made available by the White House for the state's use, Donald Trump fired back with pointed criticism, a rarity for a president who traditionally has held his ire for Democrats³ (Fritze & Jackson, 2020). The White House's plan entitled, "Proposed State Reopening Criteria," released on April 16th has similar suggestions; however, many Republican states have reopened despite not meeting the guidelines laid out in either plan (NGA, 2020c [see Appendix A]; The White House, 2020a). Table 1 shows the current status of stay-athome orders as of May 14, 2020. "Rolled back" indicates that the state has rolled back stay-at-home orders for those not at high risk and "Statewide" indicates that the ban is still in place. The chi-square test statistic indicates that the relationship between the party ID of the governor and the type of order currently in place is statistically significant. Fisher's exact test was also run and the significance between party identification and the lifting of stay-at-home orders remains the same.

In addition to the NGA and affiliated groups creating plans for the reopening of the economy, several states have also created ad hoc consortiums and regional partnerships for collaboration. Other states have created state task forces coordinating policy development and sharing of resources (NGA, 2020c; Rogers, 2020). Polling data suggest that people are looking to states as opposed to the federal government for direction during this evolving crisis with approval ratings for governors outpacing the president's. A recent poll from the Washington Post and University of Maryland released on April 28th showed that 47% of Americans rated Trump's response to the global pandemic as excellent or good, whereas respondents rated state governors regardless of party at 75% (Bump, 2020). Despite some effort toward nationwide collaboration, the United States has lagged tremendously behind other countries in their race to stem the impact of COVID-19 in states and localities.

Although executive federalism is alive and well in the United States, it seems that increased polarization has stymied the ability of the country to respond in a coherent manner. With no corresponding institutional mechanism in place for state executives to communicate with the White House outside of consultation or lobbying by governors and local executives, we observe that there is a marked disconnect in collaboration and coordination in policy developments during the pandemic. As a result, increased frustration and political brinkmanship has replaced the traditional policymaking that should occur. Can executive federalism be a useful lens in understanding how countries are responding to a pandemic? The country of Australia gives us a glimpse as to what could have transpired.

Australian Response to COVID-19

In late December 2019 and January 2020, the Australian bushfire season peaked after months of building intensity with uncontrollable fires in all six states and two territories;

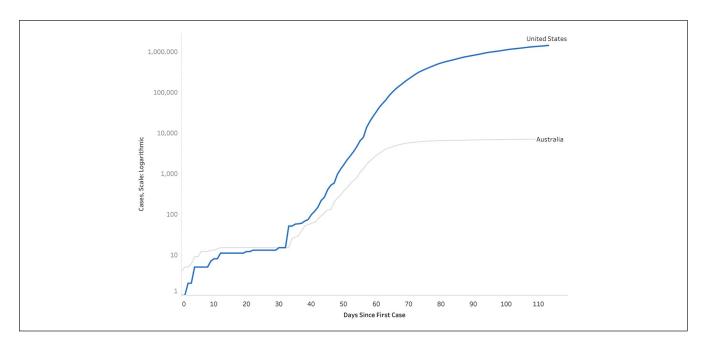


Figure 1. Logarithmic Scale of Cases in Australia and United States Since the First Case.

Source. COVID-19 Coronavirus Tracker—updated as of May 15—The Henry J. Kaiser Family Foundation (https://www.kff.org/coronavirus-covid-19/fact-sheet/coronavirus-tracker/).

ultimately, 33 people died and more than 17 million hectares burned (Richards et al., 2020). Despite calls for federal intervention, Prime Minister Scott Morrison had for months declined to act because the responsibility of fighting fires rested with the states (Albeck-Ripka et al., 2020). Frustration with overwhelmed state governments and inaction from the Commonwealth government boiled over when the Prime Minister took a holiday vacation with his family to Hawaii as the fires were raging (Albeck-Ripka et al., 2020). The bushfire crisis like other national crises in federal states demand federal coordination precisely because local services can be easily overwhelmed and coordination between localities is key to overcoming such boundary-spanning collective action problems (Walter, 2020). Morrison's failure to recognize his role was described by Daniel Flitton of the Lowy Institute, a nonpartisan policy center, as his "George W. Bush moment after Hurricane Katrina in 2005. He seemed to be out of touch and misread the depths of public concern" (Albeck-Ripka et al., 2020).

It is in the shadows of the bushfire crisis that the Morrison-led Commonwealth government response to COVID-19 must be located. On January 30, 2020, the World Health Organization (WHO) declared a Public Health Emergency of International Concern (PHEIC) for the COVID-19 outbreak in China (WHO, 2020). Australia instituted a travel ban on nationals from China and ordered its own citizens to return from China and self-quarantine ("Coronavirus Latest Updates . . .", 2020). On March 11, the WHO declared COVID-19 as a pandemic (WHO, 2020). On March 13, 2020, Prime Minister Morrison announced the formation of

a "national cabinet" composed of the Prime Minister, the state premiers, and territory first ministers. The group, described as "an indicator of collective leadership" to meet "the gravity of the situation," was to meet weekly to discuss, coordinate, and work together to implement a national response to COVID-19 (Bonyhady & Duke 2020; Council of Australian Governments [COAG], 2020). As of May 13, 2020, Australia has identified 6,975 cases or 28 cases per 100,000 and 98 people have died or less than one per 100,000 (Department of Health, 2020). It is too early to celebrate any victory over the pandemic, but the Australian response to COVID-19 has been successful even if only measured against the response to the bushfire crisis that immediately preceded it.

COAG was formed in the early 1990s in response to an intense period of policy reform and deregulation (Painter, 1998). Until its recent rebranding, COAG served to bring together the executive authority (first ministers) from across Australia once or twice a year to primarily address policy concerns of the Commonwealth in which state and territory cooperation would prove helpful. Historically, COAG has served at the whim of and catered to the policy priorities of the Prime Minister who calls, holds, and sets the agenda of the meeting. This intergovernmental forum is designed to facilitate vertical connections between the Commonwealth and state and territorial governments; it has not provided a horizontal basis for states to coordinate and communicate their own priorities. The Commonwealth's dominance of the federal–state relationship has grown out of broad interpretation of key enumerated powers that have facilitated control over taxation and spending

(Fenna, 2019; Galligan, 1987). This fiscal power has resulted in a distorted vertical fiscal imbalance (Fenna, 2008) that very much resembles coercive federalism (Kincaid, 1990). The Commonwealth now exercises influence (or control) over funding, laws, and policies across a range of policy areas originally assigned to the States (Phillimore & Fenna, 2017). However, the existence of an intergovernmental forum, such as COAG, demonstrates that the Commonwealth's dominance of the federal system is not complete and requires state cooperation to achieve some of its goals.

The primary way that COAG advances intergovernmental collaboration and decision-making is through the creation of a system of ministerial councils that function on the basis of consensus (Department of the Prime Minister and Cabinet, 2019). The councils advance COAG priorities by developing policy reforms and overseeing the delivery and review of reforms agreed by COAG (n.d.). There are currently 11 COAG councils including the Health Council or the Australian Health Ministers' Advisory Council (AHMAC), which comprises the heads of the Commonwealth, state, and territory health departments. The Health Council has four principal committees reporting directly to it, which includes the Australian Health Protection Principal Committee (AHPPC). The AHPPC is the peak decision-making committee for public health emergency management and disease control; it is chaired by the Chief Medical Officer of the Australian government and composed of the Chief Health Officers of the states and territories (COAG Health Council, 2020). The AHPPC was specifically charged by COAG to develop real-time, transparent protocols to support a consistent approach to containment and preparedness for coronavirus including management of mass gatherings, school closures, health management in remote communities, and public transport (COAG, 2020). The National Cabinet agreed that AHPPC advice will have the status of COAG advice, and each government will implement and follow the advice as necessary.

The two crises illustrate two different political responses that demanded information-sharing to facilitate cooperation, coordination, and decision-making (see Figure 1). The primary difference was the use of an intergovernmental forum, the National Cabinet, to manage the response. Significantly, this particular tool was already in the Australian toolbox; no authorizing legislation was required nor were there any constitutional hurdles as no additional powers were assigned to either level of government. The National Cabinet is simply a rebranding of the COAG, the peak body of Australian federalism. What cannot be overemphasized is that the institutional framework already exists and could be called upon to coordinate a national response if called into action by the Prime Minister.

Conclusion

In the United States, the NGA and affiliated groups have operated largely outside the sphere of influence in developing coordinated policies to mitigate the spread of the coronavirus and in plans to reopen the economy. To be sure, as these communication lines have broken down, we also observe several states "going rogue" ignoring the best practices provided by the CDC, the White House, and the NGA in a race to reopen their state's economies. Vertical collaboration and horizontal collaborative efforts in the United States have largely been on partisan lines, reflecting the limitations of American-style executive federalism in the face of a global pandemic. Development of permanent intergovernmental forums like COAG and the AHPPC in Australia would go a long way to produce the collaborative organization needed to create a holistic response as the pandemic continues. The addition of such an organization as a permanent fixture within the White House might dampen the politicization of disaster response and allow for state executives to bring their varied needs to the executive branch for action.

Declaration of Conflicting Interests

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Funding

The author(s) received no financial support for the research, authorship, and/or publication of this article.

Notes

- Source: Kaiser Family Foundation COVID-19 Coronavirus Tracker as of May 15, 2020 (https://www.kff.org/coronavirus-covid-19/fact-sheet/coronavirus-tracker/).
- FEMA's Fact Sheet on the Disaster Declaration Process: https://www.fema.gov/pdf/media/factsheets/dad_disaster_declaration.pdf
- For additional stories of the president attacking Democratic governors' efforts during the pandemic, see https://www. nytimes.com/2020/04/17/us/politics/trump-coronavirus-governors.html
- The difference is that the President of the Australian Local Government Association is not part of the National Cabinet, but is a COAG member.

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